

## **SCHEDULE E**

### **ADDITIONAL UNDERWRITING INFORMATION**

#### **I. WATER VESSEL OPERATOR SAETY PROGRAM**

The Loss Prevention unit of the Office of Risk Management has established the Water Vessel Operator Safety Program manual. This program is designed to reduce the number and severity of accidents and, therefore, minimize the financial impact on State government, while also providing the safest possible work environment for marine-oriented employees. The complete manual can be found on the Info Louisiana website at the following address: [http://doa.louisiana.gov/orm/lpmanual\\_update070111.htm](http://doa.louisiana.gov/orm/lpmanual_update070111.htm) (choose Water Vessel Program).

#### **II. FERRY OPERATIONS INFORMATION**

The Ferry Operations are divided between the Department of Transportation and Development (DOTD) and Crescent City Connection Division (CCCD). DOTD operates all ferries except those in the vicinity of the New Orleans area, which are operated by CCCD. DOTD annual income from pedestrian crossings and vehicle crossings is approximately \$268,601. CCCD annual income from vehicle crossings is approximately \$274,606. DOTD and CCCD do not collect data on the number of people riding in vehicles that utilize the ferries. A ferry operation schedule is available upon written request. The following list of ferries includes the vehicle carrying capacity and the pedestrian carrying capacity per vessel:

##### **Department of Transportation & Development (DOTD)**

<b><u>Vessel Name</u></b>	<b><u>Vehicle Capacity</u></b>	<b><u>Pedestrian Capacity</u></b>
Ascension	35-40 cars	113
Cameron II	40-45 cars	260
Feliciania	18 cars	128
Iberville	17 cars	143
St. Charles	18 cars	122
St. Francisville	35 cars	128
New Roads	35 cars	143
Acadia	35 cars	143
Ferry Barge – Duty, LA** (305-035)	12 cars and 1 tractor trailer or 1 school bus	45
Ferry Barge – Duty, LA** (305-041)	5 cars and 1 truck or 1 school bus	48

\*\*Barges that are used as a ferry and pushed by a tug boat.

##### **Crescent City Connection Division (CCCD)**

<b><u>Vessel Name</u></b>	<b><u>Vehicle Capacity</u></b>	<b><u>Pedestrian Capacity</u></b>
Louis B. Porterie	50 cars	692
Thomas Jefferson	50 cars	692
Captain Neville Levy	60 cars	870
Colonel Frank Armiger	Pedestrian Only	351
Senator Alvin Stumpf	60 cars	870
St. John	45 cars	221

**Louisiana Certification of Exempt Commercial**  
Policyholder Status Pursuant to Louisiana Regulation 72

The undersigned \_\_\_\_\_, (the Insured) certifies to \_\_\_\_\_ (the Insurer) that the Insured meets the criteria below and is an Exempt Commercial Policyholder under Louisiana law. The Insurer may issue a commercial risk insurance policy to an Exempt Commercial Policyholder without filing the policy form with the Louisiana Department of Insurance and the Insurer by signing below certifies that it has the necessary expertise to negotiate its own policy language. The policy must still comply with Louisiana law, and complaints or questions about compliance may be directed to the Louisiana Department of Insurance (1-800-259-5300).

In order to be an Exempt Commercial Policyholder, the Insured must:

1. Execute this Certification Form and return it to the Insurer.
2. Acquire the insurance policy through an insurance agent licensed in Louisiana.
3. Meet the following requirements:

Have and maintain aggregate annual commercial risk insurance premiums, excluding workers compensation and employer's liability and professional liability insurance premiums of more than two hundred thousand (\$200,000) dollars in the preceding fiscal year. In determining whether this threshold has been met, premiums paid to one or more insurers are to be added together to reach the total aggregate.

At the time the policy is issued the policyholder must have (a) if a single company not less than fifty (50) employees; (b) if a member of an affiliated group not less than one hundred (100) employees collectively; (c) if a municipality a population of not less than fifty thousand (50,000); and, (d) if a public entity an operating budget of not less than twenty (\$20,000,000) million dollars for the most recently completed calendar or fiscal year whichever applies.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Printed: \_\_\_\_\_

Title: \_\_\_\_\_

Risk Manager: \_\_\_\_\_

## REPORT OF HULL SURVEY

Date of Survey: \_\_\_\_\_ Type of Vessel: \_\_\_\_\_ ☐ Afloat ☐ Dry-dock ☐ Other \_\_\_\_\_

Vessel Name: \_\_\_\_\_ Official Cost Guard No.: \_\_\_\_\_

### \*\*\* HULL \*\*\*

Built By: \_\_\_\_\_ Date: \_\_\_\_\_ ☐ Steel ☐ Wood ☐ Aluminum ☐ Other \_\_\_\_\_

Length: \_\_\_\_\_ Beam: \_\_\_\_\_ Depth: \_\_\_\_\_ Loaded Draft: \_\_\_\_\_ Loaded Freeboard: \_\_\_\_\_ Last Dry-docked: \_\_\_\_\_

Tonnage Gross: \_\_\_\_\_ Net: \_\_\_\_\_ Superstructure: ☐ Steel ☐ Wood ☐ Aluminum ☐ Other \_\_\_\_\_

Has vessel been converted or rebuilt? ☐ Yes ☐ No Comments: \_\_\_\_\_

### \*\*\* PROPULSION MACHINERY \*\*\*

Manufactured By: \_\_\_\_\_ Date: \_\_\_\_\_ Type & H.P.: \_\_\_\_\_

Fuel: \_\_\_\_\_ Last Major Overhaul: \_\_\_\_\_ Is engine obsolete or parts unavailable? ☐ Yes ☐ No

Ventilation Adequate? ☐ Yes ☐ No Turbocharger? ☐ Yes ☐ No

### \*\*\* AUXILIARY MACHINERY \*\*\*

	Manufacturer	Type & H.P.	Fuel	Location	How Cooled
(1)	_____	_____	_____	_____	_____
(2)	_____	_____	_____	_____	_____

Check if on board: ☐ R/T ☐ Fath ☐ Radar ☐ Auto Pilot ☐ AM/FM Radio ☐ Other \_\_\_\_\_

### \*\*\* DECK EQUIPMENT & MACHINERY \*\*\*

Refrigeration Machinery: ☐ Yes ☐ No If Yes, Describe: \_\_\_\_\_

Electrical Equipment & Wiring Satisfactory ☐ Yes ☐ No Is FIGHTING EQUIPMENT built in system? ☐ Yes ☐ No

anchors & Mooring Equipment ☐ Yes ☐ No If Yes, Type: \_\_\_\_\_ Date Last Inspected: \_\_\_\_\_

Fuel Tanks, Filling & Venting ☐ Yes ☐ No Does portable equipment meet N.F.P.A. or U.S.C.G. Standards? ☐ Yes ☐ No

Stoves, Heaters, A/C ☐ Yes ☐ No Describe any tenders or boats: \_\_\_\_\_

For the waters to be navigated, does vessel comply with all government regulations? \_\_\_\_\_

Life Saving: ☐ Yes ☐ No ☐ Not Applicable Bulkheading: ☐ Yes ☐ No ☐ Not Applicable

Navigation Lights: ☐ Yes ☐ No ☐ Not Applicable Crew Complement: ☐ Yes ☐ No ☐ Not Applicable

Pumps: ☐ Yes ☐ No ☐ Not Applicable All Others ☐ Yes ☐ No ☐ Not Applicable

Is vessel suitable for intended service? ☐ Yes ☐ No

Is vessel suitable to navigate waters requested? ☐ Yes ☐ No

Market Value: \$ \_\_\_\_\_ Replacement Value: \$ \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

Surveyor Name: \_\_\_\_\_ Surveyor Signature: \_\_\_\_\_  
(Please Print)